

U.S. DEPARTMENT OF STATE  
**CONFISCATION CLAIMS AGAINST NICARAGUA**

OMB APPROVAL NO. 1405-0083  
EXPIRATION DATE 03-31-95  
ESTIMATED BURDEN: 30 MINUTES\*

PART I - GENERAL INFORMATION		
1. NAME	2. COMPANY	
3. ADDRESS		
4. TELEPHONE	5. FAX NUMBER	
6. REPRESENTATIVE (Attorney)		7. TELEPHONE
8. DATE U.S. CITIZENSHIP ACQUIRED	9. PLACE	10. DATE OF THIS FORM
PART II - TYPE OF PROPERTY		
11. DESCRIPTION		
A. SHARES	<div>NAME OF COMPANY _____</div> <div>TYPE OF BUSINESS _____</div> <div>LOCATION _____</div> <div>DATE TAKEN _____</div> <div>DATE OF CONFISCATION &amp; DECREE _____</div> <div>ENTITY CONTROLLING SHARES _____</div>	
B. HOUSES	<div>LOCATION _____</div> <div>DATE TAKEN _____</div> <div>DATE OF CONFISCATION &amp; DECREE _____</div> <div>ENTITY CONTROLLING HOUSE _____</div> <div>PERSON (ENTITY) OCCUPYING HOUSE _____</div>	
C. LAND	<div>NAME _____</div> <div>SIZE OF LAND (in manzanas) _____</div> <div>USE OF LAND _____</div> <div>LOCATION _____</div> <div>DATE TAKEN _____</div> <div>DATE OF CONFISCATION &amp; DECREE _____</div> <div>AGENCY CONTROLLING LAND _____</div> <div>PERSON (ENTITY) OCCUPYING LAND _____</div>	
D. BUSINESS	<div>NAME _____</div> <div>TYPE OF BUSINESS _____</div> <div>LOCATION _____</div> <div>DATE TAKEN _____</div> <div>DATE OF CONFISCATION &amp; DECREE _____</div> <div>AGENCY CONTROLLING IT _____</div> <div>PERSON (ENTITY) OCCUPYING BUSINESS _____</div>	

<b>E. OTHER</b>	NAME _____	
	TYPE OF PROPERTY _____	
	LOCATION _____	
	DATE TAKEN _____	
	DATE OF CONFISCATION & DECREE _____	
	AGENCY CONTROLLING IT _____	
	PERSON (ENTITY) OCCUPYING _____	
<b>F. Was the property encumbered by debt at the time of loss?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO  Creditor _____ Date of Last Payment _____		
<b>G. Estimated value of your claim in U.S. dollars</b> _____		
<b>PART III - EFFORTS TO RECOVER PROPERTY</b>		
<b>12. DID YOU FILE A CLAIM WITH THE 'PROCURADURIA'?</b>  <input type="checkbox"/> YES <input type="checkbox"/> NO    IF YES, DATE _____		<b>13. CASE NUMBER ASSIGNED</b>  _____
<b>14. DID YOU SEEK RETURN OF YOUR PROPERTY, OR COMPENSATION?</b>  <input type="checkbox"/> RETURN <input type="checkbox"/> COMPENSATION	<b>15. CERTIFICATION ISSUED</b> <input type="checkbox"/> FAVORABLE Number _____ <input type="checkbox"/> UNFAVORABLE	
<b>16. DATE OF CERTIFICATION</b>  _____	<b>17. DID CERTIFICATION COVER ALL YOUR CLAIMS?</b>  <input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>18. WHAT PROPERTIES WERE/WERE NOT COVERED?</b> (Use continuation sheet)  <div style="height: 40px;"></div>		
<b>19. DID YOU RE-REGISTER YOUR PROPERTY AT THE CIVIL REGISTRY (REGISTRO CIVIL) AFTER CERTIFICATION?</b>  <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>20. IF REGISTERED, PROVIDE INFORMATION (i.e. date registered)</b>  <div style="height: 40px;"></div>	
<b>21. HAVE YOU TAKEN POSSESSION OF THE PROPERTY?</b>  <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>22. DOES A NICARAGUAN GOVERNMENT AGENCY CONTROL YOUR PROPERTY?</b>  <input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>23. IF YES, ARE YOU COLLECTING RENT?</b>  <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>24. HAVE YOU BEEN COMPENSTATED?</b>  <input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>25. Have you approached any agency of the Nicaraguan government, in an effort to recover your property other than the National Review Commission? If so, please name agency:</b>  <div style="height: 40px;"></div>		
<b>26. What legal efforts have you undertaken in Nicaragua to recover your property. Please indicate specific legal avenues you or your representative have pursued in the Nicaraguan courts. Please name any courts to which you have appealed.</b>  <div style="height: 40px;"></div>		
<b>27. Have you requested assistance from the United States Government? If so-</b>  <input type="checkbox"/> Embassy <input type="checkbox"/> State Department <input type="checkbox"/> Other _____		
<b>PART IV - REMARKS</b>		
I authorize the United States Government to release the information contained herein to the Government of Nicaragua.		
_____ Signature		_____ Date